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APPLICANTS

Frank Yang, Palos Verdes Peninsula, CA;  
 Joseph Sandor, Santa Ana Heights, CA;

\*\* CONTINUING DATA \*\*\*\*\* *Nac ASN*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *Nac ASN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS <del>117</del>	INDEPENDENT CLAIMS <del>31</del>
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ASN</i>	Verified and Acknowledged Examiner's Signature _____ Initials _____			

ADDRESS  
 Raymond Sun  
 12420 Woodhall Way  
 Tustin, CA  
 92782

TITLE  
 Trash can assembly

FILING FEE  RECEIVED 461	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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